

## Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance 2017 JAN 19 AM 11: 59

OT MANDAUMINE THE PROPERTY OF	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: APRI	Ending Date: DECEMBER 31, 2016
Type of Report: (Check one)	
☐ 8th day preceding preliminary ☐ 8th day preceding election	☐ 30 day after election ☐ year-end report ☐ dissolution
ALISA V BREWERZ	AUSA V BREWER, FOR SCIECT BOARD
Candidate Full Name (if applicable) SELECT BOAKED	Committee Name  NANCY GREGG
Office Sought and District 5 Fair Rield St Amherst 01002	Name of Committee Treasurer  26 Coreenlea ves Dr Unit 638 Amberst 01003  Committee Mailing Address
Residential Address E-mail: AVBREWER & Camcustinet	E-mail: NANGREGG Comcastinet
Phone # (optional): 413 549-5539	Phone # (optional): 4/3 549-1199
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	243.25
Line 2: Total receipts this period (page 3, line 11	
Line 3: Subtotal (line 1 plus line 2)	243, 25
Line 4: Total expenditures this period (page 5, line)	ne 14) 60 i 00
Line 5: Ending Balance (line 3 minus line 4)	183.25
Line 6: Total in-kind contributions this period (p	age 6)
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: FLORENCE	BANK
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the be activity, including all contributions, loans, receipts, expenditures, disbursements, in-king finance activity of all persons acting under the authority or on behalf of this committee is Signed under the penalties of perjury:  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 to the committee of the committee	d contributions and liabilities for this reporting period and represents the campaign n accordance with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date: 01-18-17
Condidate with Committee and no activity independent of the committee	
I certify that I have examined this report including attached schedules and it is, to the	the best of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contributions, ag period.
Candidate without Committee OR Candidate with independent activity filing  I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the contributions.	he best of my knowledge and belief, a true and complete statement of all campaign tts, in-kind contributions and liabilities for this reporting period and represents the his committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury: Humbrush	(Candidate's signature) Date: Ol-18-12

## **SCHEDULE A: RECEIPTS**

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

	Please include your committee name and a page number on ea  Name and Residential Address		Occupation & Employer	
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
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	pts over \$50 (or listed above)			
	ipts \$50 and under* (not listed above)			
ne 11: TOTAL R	RECEIPTS IN THE PERIOD	(2)	← Enter on page 1, line 2	

## **SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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ine 9: Total Recei	pts over \$50 (or listed above)		
	ipts \$50 and under* (not listed above)	V ,	
	RECEIPTS IN THE PERIOD		
		0. Line 10 -1	Enter on page 1, line 2  Id include only those receipts not itemized above.

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

## **SCHEDULE B: EXPENDITURES**

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

report an expend	eport all expenditures. Please include your committee name and a page number on each page.)					
D-4- D-11	To Whom Paid	Address Durance of Farmer differen		A		
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount		
8/25/16	Electric Embers Cooperative	733 Page St San Francisco CA	year-of-electronic	6000		
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	Line 12: Total Expenditures over \$50 (or listed above)			60°		
	Line 13: Total Expenditures \$50 and under* (not listed above)			Ø		
	Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD					

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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